

Provider Inspection Summary
For the period 07/01/2003 to 06/30/2006
Adult Family Home

Facility Information

Facility Name: TRAILHOUSE (0009456)
Address: 402 PINE VIEW ROAD, BLACK RIVER FALLS, WI 54615
License Status: REGULAR
Licensed/Certified/Registered 11/01/2001
Regional Office: WESTERN REGION (EAU CLAIRE), (715) 836-4752

Survey History

Survey ID: 0096068 **End Date:** 12/12/2005 **Type:** ABBREVIATED **Purpose:** SURVEY
Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0091839 **End Date:** 12/16/2003 **Type:** STANDARD **Purpose:** SURVEY
Results: LICENSE/CERT/REGISTRATION ISSUED

Statement of Deficiency: #10005334 Served 01/20/2004

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.10(3)(n)1	FREEDOM FROM SECLUSION AND RESTRAINTS	02/28/2004	Yes

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